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DECLADAT		LEOD LITH ITY OR	Attorney Docket Nu	mber	41118				
DECLARAI		FOR UTILITY OR	First Named Invento	or	T. Myers et al.				
PATEN		PPLICATION	COMPLETE IF KNOWN						
(37 CFR 1.63)			Application Number	Number 09 / 660,242					
Declaration		Declaration Submitted after Initial	Filing Date	12 Se	eptember 2000				
Submitted	OR		Group Art Unit	Not \	Yet Assigned	Assigned			
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)		Examiner Name	Not Yet Assigned					
				<u>. </u>					
As a below name	d inve	entor, I hereby declare that:		***					

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
NON-GENETIC BASED PROTEIN DISEASE MARKERS										
the specification of which										
is attached hereto	(Title of the Invention)									
OR										
was filed on (MM/I	09/12/2000	as Unite	d States Applica	ation Number or P	CT International					
Application Number 00/	660.242 and w	as amended on (MM/DD/Y			1					
<u> </u>					(if applicable).					
amended by any amendme	eviewed and understand the ent specifically referred to ab	contents of the above ident	tified specificatio	n, including the c	laims, as					
Tack towedge the daty to	disclose information which is	material to patentability as	defined in 37 CF	FR 1.56.						
America, listed below and ha or of any PCT international a	ity benefits under 35 U.S.C. PCT international application ave also identified below, by application having a filing dat	checking the how and feet	st one country	other than the U	nt or inventor's nited States of or's certificate,					
Prior Forelgn Application Number(s)	Country	Foreign Filing Date	Priority	Certified Cop	y Attached?					
(Adminer(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO					
				П						
Additional foreign applica	tion numbers are listed on a	supplemental priority data	sheet PTO/SB/0	2B attached here	to:					
I hereby claim the benefit u	inder 35 U.S.C. 119(e) of an	United States provisional	application(s) lis	ted below.						
Application Number	(s) Filing Date	(MM/DD/YYYY)								
				nal provisional ers are listed on						
			supple	mental priority	data sheet					
			PTO/S	B/02B attached	i hereto.					
	1									

[Page 1 of 2]
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DE	CLARATION -	— Utilit	y or	Des	siar	Pat	ent	Apr	lication		
I hereby clain United States United States information w and the nation	n the benefit under 35 U.S.C. 120 s of America, listed below and, in s or PCT International application thich is material to patentability a nal or PCT international filing date	of any United S sofar as the su in the manner pr s defined in 37 (of this application	States applicated by the control of	cation(s), or of each	or 365	(c) of any F	CT into	ernational a	application designating		
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)			
Additiona	U.S. or PCT international applica	ation numbers at	re listed on	a supple	mental	priority data	sheet	PTO/SB/0	2B attached hereto		
	ventor, I hereby appoint the follow Office connected therewith:	ring registered po Customer Num <i>OR</i> Registered prac	ractitioner(s) to pros	ecute th	nis applicati	on and	to transac	t all business in the Pa Place Customer Number Bar Code Label here		
	Name	Regist Num	tration			Nan			Registration		
		INUIT	iber			14011	-		Number		
Dean H. N		33,981				Tarcza 33,638					
Additional r	registered practitioner(s) named o	n supplemental	Registered	Practition	ner Info	rmation she	et PT	2/SB/02C 4	attached borote		
Direct all corre	espondence to: 🔲 Custom	er Number Code Label				OR	_		dence address bek		
Name	Dean H. Nakamura										
Address	1300 19th Street, N.W.										
Address	Suite 600										
City	Washington			State	D.0	c.		20036			
Country	USA	Telephone	(202)				ZIP		250.0011		
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Name of So	le or First Inventor:		[☐A pe	tition h	nas been f	iled fo	r this uns	igned inventor		
Giv	en Name (first and middle [if a	anyl)				Family	Name	or Surna	me		
Timothy				Myers	_						
Inventor's Signature	Thole Ge	thon							Date 5/11/		
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

Name of Addi	tional Joint Inventor,	if any:				ПАре	tition has been	iled for	thin	n olemI			
Given Name (first and middle [if any])						A petition has been filed for this unsigned inventor							
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Inventor's Signature	Remark Piens 03/13/												
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City	Washington		State	DC		ZIP	20008		Tu	 SA			
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John						Taylor	Family Na	me or s	Surnar	ne			
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Name of Additio	nal Joint Inventor, if	any:				A petitio	n has been filed	l for this					
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

Name of Addit	ional Joint Inventor,	if any:				7 A ре	tition has been f	ilad for	thin				
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Sandra	Sandra					Family Name or Surname Steiner							
Inventor's						Stelliel							
Signature	J. QO.							! ,	Date	03/13/0			
Residence: City	Gaithersburg		State	MD		Counti	USA			zenship	USA,		
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N. Leigh	N. Leigh						Family Name or Surname Anderson						
Inventor's Signature	1 N 120 6	1 /			1_								
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